## 119000236768

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



700320751977

11/16/16--01011--016 \*\*30.00



NOV 3 0 2018

T SCHROF 1

## **COVER LETTER**

Registration Section Division of Corporations

TO:

AJ&L HON	MES LLC			
30B3EC1.	Name of Lim	aited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	·		
	RAQUEL MOWRER			
		Name of Person		
	OGC ASSOCIATES ORL	ANDO CORP		
	Firm/Company 7065 WESTPOINTE BLV STE 303			
	7062 ME21LOINTE RFA			
	ORLANDO - FL 32835	Address		
	INFO@OGCORLANDO.C	City/State and Zip Code		
	E-mail address: (	to be used for future annual report not	ification)	
For further information of	oncerning this matter, please c	all:		
RAQUEL MOWRER		407 985-4404 at ()		
Name o	f Person	Area Code Daytim	ne Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILING ADDRESS: Registration Section Division of Corporations		STREET/COURIER ADDRESS: Registration Section Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on   [10/05/2018]  Florida document number   [L18000236768]  This amendment is submitted to amend the following:	and assigned
Florida document number L18000236768	and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability company here:	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrevi	ation "L.L.C."
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)  DAVENPORT - FL 33896 US	
	<del></del>
1549 MAIDSTONE CT	
Enter new maining address, it applicable:	-
(Mailing address MAY BE A POST OFFICE BOX)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	DE OLIVEIRA, SANDERSON S, SR.	1548 MAIDSTONE CT CHAMPIONSGATE	□ Add
	<del></del>	DEVENPORT, FL 33896 ES	
			Remove
			Change
NA / C	KIERULFF, JULIO J	1548 MAIDSTONE CT	
MGR	<del></del>		
		DAVENPORT - FL 33896 US	
			☐ Remove
			<u>Ş</u> Change
			T6 8 ≥
			Add 1
			AT CI
			Remove
			<u> </u>
			The Change
		Ø,	D :
			Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change

D. If amending any other information, enter change(s) here: (Attach ad	ditional sheets, if necessary.)
•	
<del></del>	
	<u></u>
<del></del>	
	<del>- 3 5</del>
<del></del>	
E. Effective date, if other than the date of filing:	(optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing Note: If the date inserted in this block does not meet the applicable statutory document's effective date on the Department of State's records.	
If the record specifies a delayed effective date, but not an effective (b) The 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlier of:
Dated November 13 2018.	
Signature of a member or authorized representa	ative of a member
JULIO J. KIERULFF	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00